

Exhibit “H”



Peter E. Ross, Staff Attorney
965 Great Plain Avenue
Needham, MA 02492
Mail Code: MA1-CBO-0683
Phone: 781-433-8763
Fax: 484-338-2859
prosa@sovereignbank.com

BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED
Receipt Number: 7006 0810 0001 5793 7213

February 12, 2010

Lance S. McDougale, President
Aircraft Sales Group, Inc.
2161 CR 540A, #285
Lakeland, FL 33813

Re: Indebtedness of Aircraft Sales Group, Inc. (the "Borrower") and Lance S. McDougale (the "Guarantor," and together with the Borrower, the "Obligors") to Sovereign Bank (the "Bank")

Dear Mr. McDougale:

Responsibility for the loan arrangements between the Bank and the Borrower has been transferred. All communications from the Borrower and/or Guarantor to the Bank are to be addressed to Milton Walker, until further written notice from the Bank.

Reference is made to that certain Aircraft Promissory Note in the original principal amount of \$160,900.00, by the Borrower in favor of the Bank and dated October 14, 2004 (the "Note"). The Borrower is in default of its obligations to the Bank in that the Borrower has failed to pay the Note when due. As a result of the Borrower's default, the Bank has elected to require the immediate payment of the Note, in full.

As of February 11, 2010, the indebtedness immediately due and owing to the Bank on account of the Note is \$138,849.54, and interest continues to accrue on the principal balance, at current rates, in the amount of \$22.99 per day. Demand is hereby made upon each of the Obligors for the immediate payment in full of all amounts due and which may become due under the Note.

The balance due under the Note may increase or decrease due to payments, the application of collateral proceeds, and the accrual of interest, late charges, costs of collection and any other fees, costs and expenses. Therefore, immediately prior to remitting payment, please contact Milton Walker, Vice President at 410-638-6261 to obtain final payoff amounts and remittance instructions.

The Bank reserves all rights and remedies available to it under the Note and under any and all other notes, instruments or agreements between the Bank and the Borrower, or applicable law, all of which are expressly hereby reserved. No discussions between the Bank and the Borrower concerning this demand for payment, other loan relationships between the Bank and the Borrower, or any other matter shall imply an agreement on the part of the Bank to waive any of its rights and remedies or to forbear from taking any action authorized by the Note, any and all other loan documents or applicable law, whether or not such discussions may be



continuing. The acceptance of any partial payment of any of the obligations of the Borrower to the Bank shall not be deemed a waiver or limitation of any of the Bank's rights reserved herein as to the full amount of any unpaid balance. Any delay or forbearance by the Bank in the enforcement or pursuit of any of its rights and remedies under the Note or applicable law shall not constitute a waiver thereof, nor shall it be a bar to the exercise of the Bank's rights or remedies at a later date.

Very truly yours,
Sovereign Bank

A handwritten signature in dark ink, appearing to read "Peter E. Rosa".

Peter E. Rosa, Staff Attorney

Copies to:
Milton Walker, Vice President
Saraday Yockel, Vice President

BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Receipt Number: 7006 0810 0001 5793 7220

Lance S. McDougale
5705 Summitview Court
Lakeland, FL 33813

Peter E. Rosa, Staff Attorney
Sovereign Bank
965 Great Plain Avenue
Mail Code: MA1-CBO-0683
Needham, MA 02492

Lance S. McDougale, President
Aircraft Sales Group, Inc.
2161 County Road 540A, #285
Lakeland, FL 33813



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Lance S. McDougale, President Aircraft Sales Group, Inc. 2161 County Road 540A, #285 Lakeland, FL 33813</p>		<p>2. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number</p> <p>(Transfer from service label) 7006 0810 0001 5793 7213</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
PS Form 3811, February 2004		Domestic Return Receipt 1025PC-02-M-1540	

U.S. Postal Service [®]	
CERTIFIED MAIL[™] RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Sent to	Lance S. McDougale, President Aircraft Sales Group, Inc. 2161 County Road 540A, #285 Lakeland, FL 33813
Street, Apt. No., or PO Box No.	
City, State, ZIP+4 [®]	
PS Form 3800, July 2003	

Peter E. Rosa, Staff Attorney
Sovereign Bank
965 Great Plain Avenue
Mail Code: MA1-CBO-0683
Needham, MA 02492

Lance S. McDougle
5705 Summitview Court
Lakeland, FL 33812



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee X</p>	
<p>1. Article Addressed to:</p> <p>Lance S. McDougle 5705 Summitview Court Lakeland, FL 33812</p>		<p>B. Received by (Printed Name) C. Date of Delivery</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service)</p>		<p>7006 0810 0001 5793 7220</p>	
PS Form 3811, February 2004		Domestic Return Receipt 102895-02-00-1500	

U.S. Postal Service	
CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Sent To	Lance S. McDougle
Street, Apt. No., or PO Box No.	5705 Summitview Court
City, State, ZIP+4	Lakeland, FL 33812
PS Form 3800, 10-01	